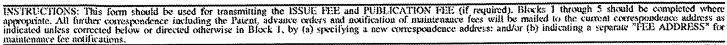
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571)-273-2885 or <u>Fax</u>



FIRST NAMED INVENTOR

DAVE GOH

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 fee any change of address)

FILING DATE

06/22/1998

HEWLETT-PACKARD COMPANY Intellectual Property Administration 3404 E. Harmony Road Mail Stop 35 FORT COLLINS, CO 80528

APPLICATION NO.

09/102,207



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Kathy L. Hungsberg	(Depositor's mana)
/Kathy L. Hungsberg/	(Signature)
12/20/2011	(Date)

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1530

APPEN, TYPE	SMALL ENSITY	ISSUE PEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUETES	TOTAL PEE(S) DUE	DATE DUE 01/18/2012		
nonprovisional	NO	\$1740	\$0	.90	\$1740			
EXAMINER		ART UNIT	CLASS-SUBCLASS	12/21/2011 SZEWDIE2 00000020		082925	0910220	
DAVIS, DA	DAVIS, DAVID DONALD 2627		709-224000	01 FC:1501	1740.00 DA			
Change of correspondence address or indication of "Fee Address" (37 FR 1.363).  Change of correspondence address (or Change of Carrespondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Castomer Number is required.		(2) the name of a said that the said as a said the						
(A) NAME OF ASS	IGNEE		data will appear on the p off a substitute for filing an (b) RESIDENCE: (CITY ompany, L.P.	atent. If an assignee is id assignment. and STATE OR COUNT HOUSTON,	RY)	ment has b	een filed F	
lease check the appro-	oriate assignee category or	categories (will not be p	rinted on the patent):	Individual **Corporati	on or other private group	entity 🔾	Governmen	
a. The following fee(s) are submitted:    Issue Fee   Publication Fee (No small entity discount permitted)   Advance Order - # of Copies			4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number. 08-2025 (enclose an extra copy of this form)					

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